PATENT APPLICATION FEE DETERMINATION RECORD  Effective October 1, 2004									Application or Docket Number															
													CLAIMS AS FILED - PART I											
(Column 1) (Colum							_	SMALL EN	YTITY	OR	OTHER SMALL													
TO	TAL CLAIMS	; 						RATE	FEE		RATE	FEE												
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEE		OR	BASIC FEE	757												
TOT	AL CHARGEAE	BLE CLAIMS			. /			X\$9=		OR	X \$ 18 =	/												
INDE	PENDENT CL	AIMS	2 minus 3 =					X \$ 44 =		OR	X \$ 88 =	-												
MUL	TIPLE DEPEN	DENT CLAIM P	ESENT -					+ \$ 150 =		OR	+ \$ 300 =													
* If the difference in column 1 is less than zero, enter "0" in column 2								TOTAL		OR	TOTAL													
CLAIMS AS AMENDED - PART II OTH											OTHER	THAN												
		(Column 1)	<u></u>	(Column		(Column 3)		SMALL	ENTITY	OR	SMALL													
AMENDMENT A		REMAINING AFTER AMENDMENT		HIGHES NUMBE PREVIOU PAID FO	R SLY	PRESENT EXTRA		rate	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE												
	Total	•	Minus	••		=		X \$ 9 =		OR	X \$ 18 =	~4												
	Independent	•	Minus	***		=		X \$ 44 =		OR	X \$ 88 =	_												
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+ \$ 150 =		OR	+ \$ 300 =													
								TOTAL' ADDIT, FEE		OR.	TOTAL ADDIT, FEE													
	<del></del>	(Column 1)		(Column		(Column 3)	ı	<u> </u>	-	<b>!</b> !														
AMENDMENT B		REMAINING AFTER AMENDMENT		NUMBE PREVIOU PAID FO	R SLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE												
	Total	•	Minus	**		=		X\$9=		OR	X \$ 18 =													
	Independent	•	Minus	***		=		X \$ 44 =		OR	X \$ 88 =	<del></del>												
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+\$ 150 =		OR	+ \$ 300 =													
							•	TOTAL ADOIT, FEE		OR	TOTAL ADDIT, FEE													
	<del></del>	(Column 1)	,	(Column	<u> </u>	(Column 3)		<del>,                                      </del>		<b>7</b> 1	·	, , , , , , ,												
AMENDMENT C		REMAINING AFTER AMENDMENT		HIGHES NUMBE PREVIOU PAID FO	R SLY	PRESENT EXTRA	·	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE												
	Total .		Minus	••		=		X \$ 9 =		OR	X \$ 18 =													
	Independent		Minus	•••		=		X \$ 44 =		OR	X \$ 88 =													
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+ \$ 150 =		OR	+ \$ 300 =	2												
	If the enterior						•	TOTAL ADDIT, FEE		OR	TOTAL ADDIT, FEE													
••	If the "Highest No If the "Highest No	umber Previously I umber Previously I	Paid For IN THIS Paid For IN THIS	SPACE is les	s than	120", enter 120". 13", enter 13".	ound in	the appropriate	e box in colu	mn 1,		If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  If the "Highest Number Previously Paid For" IN THIS SPACE is less than "20", enter "20".  If the "Highest Number Previously Paid For" IN THIS SPACE is less than "3", enter "3".  The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.												